	Under the Pare	erwork Reduct	ion Ac	of 1995, ma	Kellons ar	t required	U. S. P to respond to a col	eter eeri	App App Des I	roved for use mark Office; I Alian unlace it	ditout)	(Q) 1/2002 ARTMENT A Valid OM	OVSBAGE (684 ON GENTLOO OF COMMERCE
U. S. Petent and Treatment Office: U.S. Petent and Treatment Office: U.S. DEPARTMENT OF U.											· ~~		
H	CLAIMS AS FILED - PART I									ENTITY	OF	OTHER	
FO	(Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA											SMALL	ENTITY
			13				× 100		RATE	FEE		RATE	860
اسا	ASIC FER					1				3	05		\$ \$860
TOTAL CLAIMS			3 mienz 20 ·				1	x S_	•	OR	x S		
INDEPENDENT CLAIMS (17 CFX 1.140))			(million)			<u> </u>	1	×		OR	x		
MULTIPLE DEPENDENT CLAIM PRESENT (0/CTRLIK4)) + OR +													
• If the difference in golumn I is less than year, under "O" in column 2									TOTAL	·	OR	TOTAL	860
2	CLAIMS AS AMENDED - PART II (Cohumn 1) (Cohumn 2) (Cohumn 3) (Cohumn 3) SMALL ENTITY OR SMALL ENTITY									THAN			
_		CLAIL		N. T. W			(Catapas 3)	٦		T :	1	SMILL E	EVIIII
AMENDMENT A	3	REMAIN	ING	200	NU	MBER	PRESENT	ı	RATE	ADDI-		RATE	ADDI- TIONAL
		AFTE		10 M	-8	'IOUSLY D FOR	EXTRA	I	1	FEE	ŀ	MIE	FEE
	Total Or CFR Ltgcp	•	$\overline{\cap}$	Minus	••	_	1-	1	x 5 -	 	OR	×3 -	
	Independent	•		Minus !	K.	Q	-	1			OR	-	1
	(17 CFR L1603)	SENTATION	<u></u>		1		(37 CF3, 1.14(4))	┨		 	OR	×	
17	177.411	25LIVIIÓN	UP IN	OL HIPLE DE	PENDER	I CLAIM	(1) CAT FIRED	J	<u></u>	<u> </u>	OR	<u> </u>	
10	12.64	(Column))		(Cole	uma 2)	(Crhene 3)	A	TOTAL DOTT. FEE	L	ORA	TOTAL DDIT. FEE	
AMENDMENT B	7.5	CLAIM	s		ню	HEST		1		ADDI-			ADDI-
		REMAIN				MBER IOUSLY	PRESENT	H	RATE	TIONAL		RATE	TONAL
	3.33	AMENDM				FOR	BAIKA	I		FEE			FEE
	Total presulta)	1.17		Minus	" c	20		1	<u>.a</u> .		OR	* & & -	
	ladependent OTOFA LIAND	•		Minus	•••	3		П	<u>,</u> 44.		OR OR	<u> 88 -</u>	
		MOTTATION	OF ML	MULTIPLE DEPENDENT CLAIM			07 CFR L1440	l	150		OR.	-300.	
	1/16/04	(Column I)	,		(Colu	es 21	(Column 3)	- ·	TOTAL DDIT. FEB		ORAL	TOTAL DIT. FEE	
	*. *	CLAIM	7			IEST				ADDI-			
ပ္က		REMAIN	1:			IBER	PRESENT		RATE	TIONAL		RATE	ADDI-
		AFTER AMENDMI	w			OUSLY FOR	EXTRA	П		FEE		~	FEE
	Total 07 CFR L1443	•		Minus	٢٠ <u>٪</u>	, , , , ,	=		.,9-	· · ·	OR	s 10 -	
AMEND	ladependent preta Liepy	•	~-4	Minus	***				.44.		OR	8.	—
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM DECELIGO								150.		OR C	300.	-
											OR L	TOTAL	——
•• if i	he Highest Num	iber Previously	Pald I	for IN THIS	SPACE is	less than 2	0, enta "20".	A	TOTAL DDIT. FEE			DIT. FEE	
if d	se "Highest Mumbe "Highest Mumbe	her Previously • Previously P	Paid F aid For	or IN THIS (Total or in	SPACE is Sependent)	less than), is the high	enter "3". est mumber found i	e eh	e appropriete	box in colum	n <i>)</i> .		
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Budta How Switners: This form is summited to lake 0.7 hours be compiled. These will vary depending upon the needs of the individual case. Any committed in the amount of time our arrequired to complete this form should be sent to the Celef Information Officer, U.S. Patrals and Trademark Policie, Washington, DC 20231. DO NOT SEND FEES OR CONDILETED FORMS TO THIS ADDRESS. SEND TO: Autisses Commissioner for Patents, Washington, DC 20231.